1983 - SOUTHERN

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF MISSISSIP

for the

Southern District of Mississippi

Southern Division

FILED

AUG - 9 2022

ARTHUR JOHNSTON
DEPUTY

Eddie Mc Coy, L2187

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Warden J. Vigliante, Capt. Ray, unit Manager: Mr. Smith, Sergent Naylor, and Go Ms. Young

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.

3:22cv 455- CWR-LGI (to be filled in by the Clerk's Office)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

Pro Se 14 (Rev. 12/16	) Complaint for Violation of Civil Rights (	Prisoner)

Shield Number

Employer Address

Ĭ.	The Parties	to This	Complaint
	A THO A MI CLOS		COMMINIC

#### A.

В.

The Plaintiff(s)				
Provide the information below for needed.	each plaintiff	named in the co	omplaint. Attacl	h additional pages if
Name	Eddie	Mc Coy		
All other names by which		<del></del>		
you have been known:				
ID Number	·L218	37		
Current Institution	South M	المحافظة	Correctio	nal Institution
Address	P.D.Bo	x 1419		
	) enkes	ville	Ms.	39451
	<del></del>	City	State	Zip Code
The Defendant(s)				
Provide the information below for a individual, a government agency, a listed below are identical to those of the person's job or title (if known) an individual capacity or official capacity.	n organization ontained in the d check wheth	, or a corporati e above caption er you are brin	ion. Make sure in For an individual in For an individual in Formal	that the defendant(s) dual defendant, include aint against them in their
Defendant No. 1		1	• \	
Name	Warder	1.J. Vigl	iante	
Job or Title (if known)	Warde	<u> </u>		
Shield Number	<del></del>	<del></del>	<u> </u>	1 = ./.)
Employer	EastM	- · · · · · · · · · · · · · · · · · · ·	Corrections	1 tacility
Address	10641	HWY 80	West	20201
	Merid	City		3930 1 Zip Code
	Individ	ual capacity	Official ca	•
Defendant No. 2				,
Name	Ms, P	ay		
Job or Title (if known)	Capta	່ເກ່		

Meridian City

Individual capacity

East-Meridian Correctional Facility 10641 Hwy 80 West

MS State

Official capacity

Page 2 of 11

Zip Code

Pro Se	14 (Rev. 12/	16) Complaint for Violation of Civil Rights (P	risoner)
		Defendant No. 3  Name  Job or Title (if known)  Shield Number  Employer  Address	Mr. Smith Unit Manager  East Meridian Correctional Facility 10641 Hwy 80 West Meridian  City  State  Official capacity
		Defendant No. 4  Name  Job or Title (if known)  Shield Number  Employer  Address	Mr. Naylor Sergent  EastMeridian Correctional Facility IDb41 Havy 80 West Meridian MS 39307 City State Zip Code  Individual capacity  Official capacity
II.	Under immu Feder	nities secured by the Constitution ral Bureau of Narcotics, 403 U.S. tutional rights.  Are you bringing suit against (a Federal officials (a Bivens State or local officials (a § Section 1983 allows claims alleged the Constitution and [federal laged).	claim)  1983 claim)  eging the "deprivation of any rights, privileges, or immunities secured by wsl" 42 U.S.C. 8 1983. If you are suing under section 1983, what
	C.	8th and 14th Counts under Rivers of	nstitutional right's Protection from harm (usual officials?  nay only recover for the violation of certain constitutional rights. If you constitutional right(s) do you claim is/are being violated by federal

5	$\cap$	11		1
De	ten	d	an	

Jobor Title (If known) C/o Correction officer
Shield Number Employer Address

East Mississippi Correctional Facility 10641 Hwy 80 West Mericlian Ms. 39307

City State Zip Code

Individual Capacity The Official Capacity

# 8th; 14th Constitutional Rights

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia."
 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

# See attached pages 4 of 11 (a)(b)(c)(d)

III.	Prisoner Status			
	Indicat	e whether you are a prisoner or other confined person as follows (check all that apply):  Pretrial detainee		
		Civilly committed detainee		
		Immigration detainee		
	V	Convicted and sentenced state prisoner		
		Convicted and sentenced federal prisoner		

#### IV. Statement of Claim

Other (explain)

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.
- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

See Exhibit's 4 of 11 and attached

Defendant (1) How each defendant is involved Warden: J. Vigliante, 8th and 14th His. Const.

(1) "acted under color of local, State and federal law by being" deliberate" Ito repeated prison Violeance. Warden Vigliante Placed false RVR's on my record after Incident he is also working with inmates covering up my assault, say Quote: That I, McCoy cut my-self.

(2) He also worked with the Unit Manager Mr. Smith, and the inmates to Cover up my attack.

The warden is in Violation's of MDOC (policies #20-05-01) protection from harm and Security Threat Group Management (Policy #16-19) & MDOC (Policy #12-01)

C.I.D Inspection and Investigation policy #12-01, Notification of Incidents to C.I.D M.D.O.C. (Policy #12-04) and Criteria for C.I.D. Investigations MDOC (Policy #12-05) and M.D.O.C. Grievance Procedures (Policy #30-08-01)

(3.) I, McCoy filed (3) three Grievance Complaint's
the first one filed May 30,2022, Second one filed on
5/31/22, 4 Third one filed on June 2, 2022 See Attached
Exhibit's (A), (B), & (C) ARP Stamped and Sworn
to by Notary public. [ See also Inmate Request Form
to Case Manager dated June 2,2022 Stamped and
Sworn to by Notary public all filed asking for help.
Exhibit (D)

(4) I, Mc May was shipped off before receiving a response from either A.R.P. that was filed nor was one (1) forwarded to me at Current Address. My right's to the grievance procedure was violated.

Date of incident 5/30/22

E.M. C. F. East Mississippi Correctional Facility

East Meridian Correctional Facility

Same Place

Defendant (2) How each defendant is involved Captain Ray 8th and 14th 41s. const. (1) acted under color of local, State and Federal law

- (1) acted under color of local, state and federal law by being "deliberate." indifferent" to repeated prison violeance. Captain Ray worked with gang members inmates to get me put in lock down for no reason. I, Mc Coy was not suppose to be in lock down, Capt. Ray did false reports and had me placed in lock down on April 26, 2022 i, Mc-Coy was attacked 5/30/22, while in lock down.
- (2) The Captain Bay is also in Violation of M.D.D.C.

  (Policies #20-05-01) protection from harm, Security

  Threat Group Management (Policy #16-19), M.D.O.C.(Policy
  12-01) C.I.D. Inspection and Investigation

  Notification of Incidents to C.I.D. M.D.O.C.(Policy
  #12-04), Criteria for C.I.D. Investigation M.D.O.C.

  Policy #12-05), & Grievance Procedure (Policy #2008-01)

Date of incident 4/26/22

E.M.C.F. East Mississippi Correctional
Facility : East Meridian Correctional
Facility
Same Place

To be Noted: All defendant's knowingly Violated Their Oath's See Attached Exhibit Defendant (3) How each defendant is involved

unit Manager: Mr. Smith, 8th and 14th wis constituted under color of local, State and federal law by being "deliberate indifferent" to repeated prison Violeance. I, Mc Coy begged for days to move me because the lights and Sink didn't work. He, Mr. Smith worked with inmates and warden Vigliante to Cover up my attack.
Date of incident 4/86/22

(2) unit Manager: Mr. Smith is also in violation of M.D. -O. C. (Policy # 20-05-01) protection from harm, M.D.O.C. Policy # 16-19) Security Threat Group Management, Notifi-ication of Incidents to C.I.D. M.D. D.C. Policy#12-04). E.M.C. F. East Miss. Corr. Facility

Defendant (4)

Sergent: Naylor, 8th and 14th 4.5. Const. (1.) acted under color of local, State and federal law by being "deliberate indifferent" to repeated prison Violeance. Sergent Naylor was the floor officer he was no where to be found, he was the first officer on the Scene. Inmates told him that I, mc Loy had Stabbed my-Self. Sergent Naylor, unit manager Mr. Smith, Captain Ray, and warden vigliante Not one of them had this matter investigated. Sergent came an looked at me and left, he stayed missing for over 30 min's too a hour before he came back with help.

(2) Sergent Naylor, is also in violation of M.D.O.C. (Policy \*20--05-01) protection from harm, M.D.O.C. (Policy \*16-19) Security threat Group management.

Date of incident 5/30/A2
E.M. C.F. East Mississippi Correctional Facility
Med
"meridian"

Same Place

Defendant (5) How each defendant is involved

C/O Corrections officer Ms. Young 8th and 14th 413. Constr.

(1.) acted under color of local, state and federal law

by being deliberate indifferent to repeated prison

Violeance. C/O Ms. Young was the Tower officer but

the only thing is Ms. Young was not in the tower because

She is somewhere else doing the wrong thing with an Inmote

while i, M Coy was being attack. She left my life to other

inmate's who third to kill me, I was stabbed in my hand

and in cut deep across eyebrow, Left eyebrow. I had

to ge "13" Stiches.

Date of incident 5/30/22

C/O Ms. Young is also in Violation of M.D.D.C (Policy # 20-05-01) Protection from harm.

E.M.C.F. East Mississippi Correctional Facility

Defendant (6) 8th and 14th H.S. Const.

Unit Manager Ms. William

(1) acted under Color of local, State and federal law
by being "deliberate indifferent" to repeated prison
Violeance. Ms. William put false information to Classify
Me with (11 point's) meaning i'm (C) custudy, but the
prison that i'm at Now, which is S.M.C.I. case Manager
over road the 11 point's and Change it to 8 due to No
B.V.R. They let me Stay long enough to heal and before
i could receive my A.R.P. response, but they were
file see Exhibt's (A), (B), i(C).

Date of incident 10/08/22

Unit Manager Ms. William is also in violation of M.D.D.C.

(Policy#20-05-01), M.D.O.C. (Policy # 16-19) Security

threat Group Management

E.M.C.F. East Mississippi correctional Facility

## East Mississippi Correctional Institution (E.M.C.F.)

### Statement of Claim

On april 26, 2022 I, McCoy, L2187 was incarcevated and confined to East Hissippssippi Correctional Institution (EHCF) 4 Delta Cell #114. Capt. Ray and CID searched my cell and me and found nothing. They had me placed in Lockdown 5 Bravo cell #116 where the sink and lights did not work. Later on that day april 26, 2022, I begged Unit Hanager Smith to be moved due to no sink and no lights. I also begged all that day and every other clay, that I had a chance to see someone to be moved from lockdown and there was no reason from the start for me to be there. On 5/30/22 c/o Ms. Young was assigned to Housing Unit Tower 5, but if you reverw the "camera system" it will show and prove that she was not on post for hours while I, McCoy was being attacked and assaulted, even aggravated assaulted by gang-members ord/immates.

-

On april 30, 2022, Sargent Naylor was assigned to be the floor officer. He was nowhere to be found. After the incident happened he was the first officer on the scene. Inmates told him that I, HcCoy stabbed myself. The Sargent falsified his report, "Saying, I, McCoy had cut myself." He came an looked at me and left again and stayed missing for over 30 mins to an hour before he came back with help. After that he took me to the Anderson Hospital in Meridian, Ms. I was given 13 stath statches over my left eye brow. I rist from blocking a icnife. I see attachments ARP (a), (b), (c) and (d) II was 5tab by knife in the rist as well, trying to block my face, and the rest of my body.

Ofter Filing my Gerievance through the Administration Remedy Program and while I was healing the Warden had me moved before I could exhaust them. The Warden, Unit Manager Ms. Williams and Sargent Naylor Falsified thier reports and had me, McCoy reclassified from a negative (1) one to eleven (11) points which is C custody and had me moved to 5. M.C. I. to cover up what they allowed to happen. After being here my Point are back to Negative (-1) and their are know A.V. R. etc...

On 6/8/22, Warden Viglinate also worked with the inmates and the above staff to cover up their negligence.

Signature

I swear under the penalty of perjury that the foregoing is true and correct.

Pate Date

#### Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

What date and approximate time did the events giving rise to your claim(s) occur? C.

### See attached Exhibit's 40f11 a-d

What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? D. Was anyone else involved? Who else saw what happened?)

I, m Loy was stabbed because i was in the way of criminal activity. In mate gams member.

4. Grayed at E.M. C.F.

C/O Jordan at E.M. C.F.

C/O Kates at E.M. C.F.

C/O Mac Donald at E.M. C.F. and Camera Footage, & Medical

Record from Anderson Hospital in meridian, ms.

V. Injuries

> If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Lt. Grayed at E.M.G.F. Co. Smith at E.M.G.F.

13 Stiches across my Left Eye and left Arm. I went to Anderson Hospital Meridian, Ms.

and Medical records from Anderson Hospital

VI. Relief

> State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

It is my hope that this Hon. Court will grant me for pain and suffering \$3 million Dollars.

### VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
▼ Yes
☐ No
If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).  E. M. C. F. East Mississippi Correctional Facility
Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
Yes
☐ No
Do not know
Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
Yes
□ No
Do not know
If yes, which claim(s)?
A.R.P. Ex

all that i strated in pages 4 of 11 a-d attached.

Pro Se 14 (Rev.	12/16) Complaint for	Violation of	Civil Rights	(Prisoner)

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?  Yes  No
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?  Yes
	No
E.	If you did file a grievance:
	1. Where did you file the grievance?

East Mississippi Correctional Facility See Attached Exhibit

What did you claim in your grievance?

A, B, & C, & (D)

2. What did you claim in your grievance?

Being assaulted/stabbed, Need to use telephone, & help. see Attached Exhibit's A, B, C (D)

3. What was the result, if any?

I was moved to where i'am now s.m.c. I south mississippi Correction Institution and Nothing has been forwarded to me See Attached Exhibits A,B, (C), (D)

What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

it is not close because i never receive response. See Exhibits A-D attached

Pro Se 14	ro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)						
	F.	If you did not file a grievance:					
		1. If there are any reasons why you did not file a grievance, state them here:					
<ol> <li>If you did not file a grievance but you did inform officials of your claim, state who you in when and how, and their response, if any:</li> </ol>							
	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative					
	remedies.						
		(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)					
VIII.	Previo	us Lawsuits					
7 444	The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without particle the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any for brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frive malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).						
	To the	best of your knowledge, have you had a case dismissed based on this "three strikes rule"?					
	Ye						
	No No						
	If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.						

## Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner) Have you filed other lawsuits in state or federal court dealing with the same facts involved in this A. action? Yes If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is B. more than one lawsuit, describe the additional lawsuits on another page, using the same format.) 1. Parties to the previous lawsuit Plaintiff(s) Defendant(s) 2. Court (if federal court, name the district if state court, name the county and State) Docket or index number Name of Judge assigned to your case Approximate date of filing lawsuit 6. Is the case still pending? Yes No If no, give the approximate date of disposition. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

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	Yes
	☐ No
D.	If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	Parties to the previous lawsuit  Plaintiff(s)  Defendant(s)
	2. Court (if federal court, name the district; if state court, name the county and State)
	3. Docket or index number
	4. Name of Judge assigned to your case
	5. Approximate date of filing lawsuit
	6. Is the case still pending?
	☐ No  If yes the second the of disposition
	If no, give the approximate date of disposition  7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

#### Certification and Closing IX.

1

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

#### For Parties Without an Attorney A.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be ot address on file with the Clerk's Office may result

	served. I understand that my in the dismissal of my case.	y failure to keep a current address on fi	le with the C	erk's Office may iv
	Date of signing: 8/4/	27		
	Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address	Eddie Meeorg Eddie Warne Micog La187 P.O. Box 1419 Leakes Ville	MS. State	3945 Zip Code
В.	For Attorneys			
	Date of signing:			
	Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address			
		City	State	Zip Code
	Telephone Number			
	E-mail Address			